LOW INSTRUCTIONS NAME & PHONE OF CO	NTACT AT FILE) CAREFULLY R [optional]				
<u> </u>			THE	ABOVE SPACE IS FO	R FILING OFFICE U	SE ONLY
DEBTOR'S EXACT FU 1a. ORGANIZATION'S NAI		- insert only one debtor name (1a	or 1b) - do not abbreviate or combine na	mes		
1b. INDIVIDUAL'S LAST N	NDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE I	MIDDLE NAME	
MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	ON 1g. ORGA	L NNIZATIONAL ID #, if any	,
ADDITIONAL DEBTOR 2a. ORGANIZATION'S NAI		LEGAL NAME - insert only one d	debtor name (2a or 2b) - do not abbreviat	e or combine names		
2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE I	MIDDLE NAME		
MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
TAX ID #: SSN OR EIN	X ID #: SSN OR EIN ADD'L INFO RE 2e. TYPE OF ORGANIZATION ORGANIZATION		2f. JURISDICTION OF ORGANIZATION	ON 2g. ORG/	2g. ORGANIZATIONAL ID #, if any	
SECURED BARTY'S	DEBTOR	4 TOTAL ACCIONES - 4 ACCIONOS	20(2)	 (00h)		NO
3a. ORGANIZATION'S NAI		TOTAL ASSIGNEE OF ASSIGNOR	R S/P) - insert only one secured party nar	ie (3a or 3b)		
ib. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	MIDDLE NAME		
SU. INDIVIDUAL S LAST MAIVIL			TIKOT WAWLE	WIIDDEE	WIDDLE WAVIE	
MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY